

DOCUMENT RESUME

ED 197 180

CE 027 810

AUTHOR Webber, A.
TITLE Mountain Plains Learning Experience Guide: Parent Involvement. Course: Infant.
INSTITUTION Mountain-Plains Education and Economic Development Program, Inc., Glasgow AFB, Mont.
SPONS AGENCY Office of Vocational and Adult Education (ED), Washington, D.C.
BUREAU NO 498MH90008
PUB DATE Mar 75
CONTRACT 300-79-0153
NOTE 52p.: For related documents, see CE 027 766 and CE 027 809-813.

EDRS PRICE MF01/PC03 Plus Postage.
DESCRIPTORS Adult Education; *Child Development; Child Rearing; Children; *Developmental Stages; Disadvantaged; Family Programs; *Individualized Instruction; *Infants; Instructional Materials; Learning Activities; Learning Modules; *Parenthood Education; *Parent Participation; Parent Role; Parents; Postsecondary Education; Vocational Education

IDENTIFIERS Mountain Plains Program

ABSTRACT

One of five individualized courses included in a parent involvement curriculum, this course focuses on infant developmental characteristics, techniques of good physical care of the infant, and techniques for teaching the infant. The course is comprised of three units: (1) Growth and Development, (2) Infant Care, and (3) Developing the Baby's Potential. Each unit begins with a Unit Learning Experience Guide that gives directions for unit completion. The remainder of each unit consists of Learning Activity Packages (LAP) that provide specific information for completion of a learning activity. Each LAP is comprised of the following parts: objective, evaluation procedure, resources, procedure, supplemental sheets, study guide, and a LAP test with answers. The course is preceded by a pretest which is designed to direct the student to units and performance activities. (LRA)

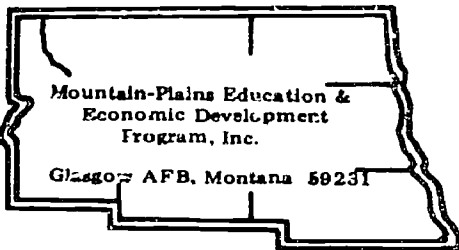
MOUNTAIN PLAINS LEARNING EXPERIENCE GUIDE:

Parent Involvement.

Course: Infant.

U.S. DEPARTMENT OF HEALTH,
EDUCATION & WELFARE
NATIONAL INSTITUTE OF
EDUCATION

THIS DOCUMENT HAS BEEN REPRODUCED EXACTLY AS RECEIVED FROM THE PERSON OR ORGANIZATION ORIGINATING IT. POINTS OF VIEW OR OPINIONS STATED DO NOT NECESSARILY REPRESENT OFFICIAL NATIONAL INSTITUTE OF EDUCATION POSITION OR POLICY.



Learning Experience Guide

COURSE: INFANT

DESCRIPTION:

The course consists of learning the approximate ages of development of the infant and toddler and the techniques of good physical care of the baby. Also, included are the techniques for teaching the infant in the home. This course consists of both individual and group learning activities.

RATIONALE:

Knowledge of infant developmental characteristics, techniques of good physical care of the infant, and techniques for teaching the infant will enable the adult to guide the child's development to his fullest potential.

OBJECTIVE:

Identify the developmental characteristics of the baby, ways of caring for the baby, and ways of helping the baby develop to his fullest potential.

PREREQUISITES:

Validation of Course 66.01 -- Interaction with children.

RESOURCES:

A resource list is attached.

GENERAL INSTRUCTIONS:

Complete all units within Course 66.02 -- Infant. Complete Course Post Test with 80% accuracy.

UNIT TITLES:

- .01 Growth and Development
- .02 Infant Care
- .03 Developing the Baby's Potential

FOLLOW-THROUGH:

Proceed to the first assigned unit.

Principal Author(s): A. Webber

RESOURCE LIST

Printed Materials

1. Your Child's Intellect. Beil, Olympus Publishing Company, 1973.

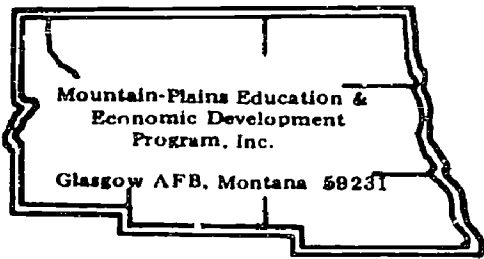
Audio/Visuals

35 mm Filmstrip/Cassettes:

1. Child Care and Development (Series 1). Elizabeth G. Mountain, McGraw-Hill Films.
2. How the Average Child Behaves: Ages 1-5 (Series 4). Maja Bernath, Parents' Magazine Films, Inc., 1968.
3. Preparing the Child for Learning (Series 3). Dr. J. Ronald Lally, Parents' Magazine Films, Inc., 1973.
4. The First Eighteen Months from Infant to Toddler (Series 2). Rita Kramer, Parents' Magazine Films, Inc., 1974.

Equipment

1. 35 mm filmstrip/cassette projector.



Learning Experience Guide

UNIT: GROWTH AND DEVELOPMENT

RATIONALE:

Knowledge of growth and developmental patterns enables adults to make reasonable expectations of the infant at various stages of development.

PREREQUISITES:

Validation of Course 66.01 -- Interaction with Children

RESOURCES:

Attached Information Sheets.

Audio-Visuals (filmstrips):

1. "The First Eighteen Months: From Infant to Toddler", Rita Kramer, Parents' Magazine Films, Inc., 1974.
2. "Preparing the Child for Learning", Dr. J. Ronald Lally, Parents' Magazine Films, Inc., 1973.
3. "How An Average Child Behaves: Ages 1 - 5", Maja Bernath, Parents' Magazine Enterprises, Inc., 1968.

Equipment: 35 mm Filmstrip/Cassette Player

GENERAL INSTRUCTIONS:

Complete all Learning Activity Packages required, according to Student Work Plan. Complete Unit Post Test with 80% accuracy.

PERFORMANCE ACTIVITIES:

- .01 Infant Growth and Development
- .02 Toddler Growth and Development

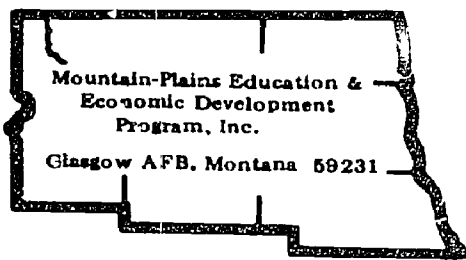
Principal Author(s): A. Webber

EVALUATION PROCEDURE:

80% correct responses in objective multiple-choice test.

FOLLOW-THROUGH:

Go to the first assigned Learning Activity Package.



Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Infant Growth and Development

OBJECTIVE:

identify the developmental characteristics of the infant, (ages: birth to one year).

EVALUATION PROCEDURE:

90% correct responses in LAP test.

RESOURCES:

Attached Information Sheet: "Infant Growth and Development".

Filmstrips: "How the Infant's Mind Grows".

"Discovering the World".

"First Steps, First Words". Magazine Films, Inc.

"Making Friends with the Family".

"How Language Grows".

Equipment: 35 mm Filmstrip/Cassette Player

PROCEDURE:

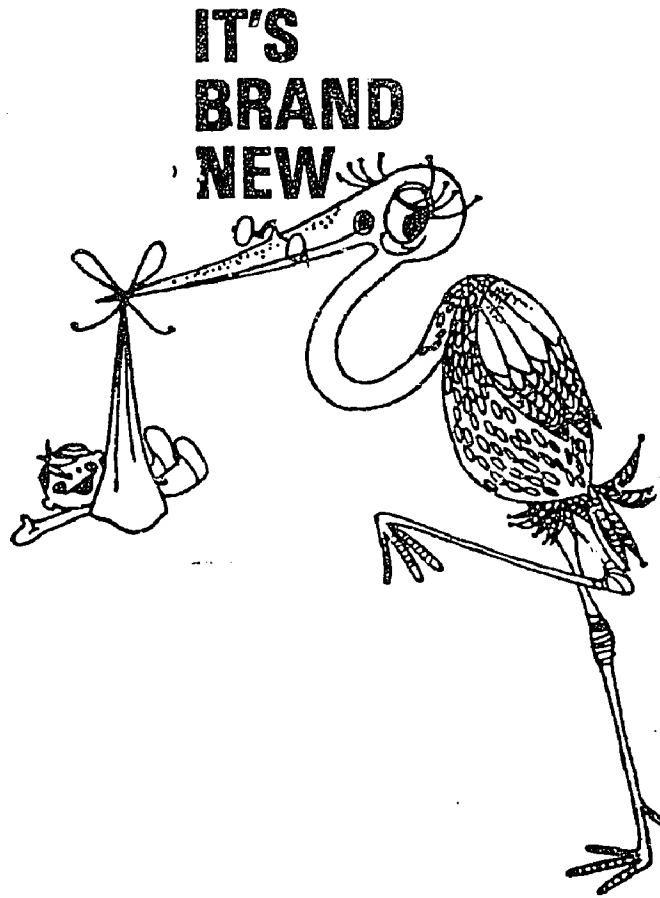
Steps

1. Read "Infant Growth and Development".
2. View all filmstrips listed under resources.
3. Complete LAP test.
4. Obtain answer key and correct test.
5. Study areas of LAP test answered incorrectly.
6. If you score less than 80%, retake the LAP test until you score at least 80%.

Principal Author(s): A. Webber

INFANT GROWTH AND DEVELOPMENT

Newborn Characteristics



The neonate (newborn infant) has certain general physical characteristics. They are:

1. His head is large in proportion to the rest of his body.
2. His features are different than they will be later. He has a little nose and chin. His eyes are blue.
3. He usually weighs 6 - 9 pounds. A baby weighing 5 1/2 lbs. at birth is considered "premature" and needs special care.
4. His bones are not very hard yet. His skull has soft spots (fontanel) which are covered with membrane.
5. His breathing is rapid and irregular.
6. His ears look like adult ears and his hearing is well developed.
7. His eyes are not fully developed. He won't be able to focus on an object until around the third month.
8. His temperature regulating mechanism is not fully developed. He chills easily and gets hot quickly. He needs even temperature.
9. When he cries, he moves all over.



Growing In The First Year

A newborn infant sleeps most of the time, usually waking only to be fed. He is making a huge adjustment! For the first time he is on his own. At this point, it is extremely important that the baby learns the world as a good place. This is done when his physical and emotional needs are met. How his needs are met is the foundation for his liking people and his own self-image.

Each infant is an individual. His particular needs and schedule will differ from those of other babies. "Mutual regulation" is usually the best way to help a child schedule his needs. First, mother should adjust her schedule to the baby's needs. This way the child feels safe and secure. He is also given time to adjust his schedule to meet the family's needs.

Because relationships are so important to human beings, it is important that the child be cared for by as few people as possible. Studies have shown that this makes quite a difference. Babies who are cared for by many people during the first year are not as well physically, socially, or emotionally.

Each baby grows in his own way and at his own rate throughout the first year. On the following pages are described processes of growth that occur in most babies during the first year.

1. Crying. The birth cry is the first breath a baby takes. During the first weeks crying becomes more individual, and mother can usually tell what the baby wants. Crying is good for a baby -- it exercises his lungs. A baby may cry because he is hungry, teething, wants comfort, or has picked up upset feelings of his parents.
2. Vocalizing. Grunts and cooing usually begin during the second half of the first year. These should be encouraged by the family. The baby will make all the sounds he'll use later in speaking. At this time, it is important that a lot of conversation be directed to him.
3. Motor Control. At first, the baby's control of his muscles is uncoordinated. Gradually, he gains better control. This control usually proceeds in an orderly way. For example, he will first gain control of his arms, then his hands, then his fingers.
4. Sucking and Thumbsucking. Babies need to do a lot of sucking. Many babies suck their thumb when they feel uncomfortable. This seems to comfort them. Usually, as a child grows older he will not need this support and will stop. Thumbsucking itself does little harm. If an older child feels insecure enough to suck his thumb we can try to make his world more pleasant. A world with little tension in it and plenty of love and attention will help.
5. Maturation. A child's development all through his life includes learning. In order to learn a certain skill, the child must have reached a certain maturation level. Maturation means that growth has taken place which now makes it possible to do a certain thing. In other words, a certain level of development has been reached. For example, in order to grasp an object, the child must have control over the muscles in his arms and hands. His nervous system must also be developed enough to coordinate his eyes and hands. If he has reached this state of maturity, he is able to practice grasping objects.
6. Social Relationships. The baby first learns to recognize certain people by touch or hearing. His eyes aren't developed enough to see them. Almost from the beginning babies approach people in their own way. Some babies are frightened, some take their time with people, some are openly excited, and some are very disinterested.
7. Play. Playing with a baby is fun for him as long as it isn't overdone. They enjoy very simple games. Babies should be played with for only short periods as they tire easily. Gradually these periods of time will lengthen.

OBSERVATION FORM: Infant

Observe the physical, independence, intellectual and language, and social-emotional development of the infant. List two examples of the developmental characteristics that the child is displaying in each category.

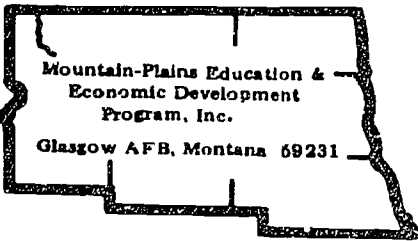
Child's age _____

Physical 1.
2.

Intellectual 1.
& Language 2.

Independence 1.
2.

Social- 1.
Emotional 2.



Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Toddler Growth and Development**OBJECTIVE:**

Identify the developmental characteristics of the toddler, (ages one year to two years).

EVALUATION PROCEDURE:

80% correct responses on LAP test.

RESOURCES:

Attached Information Sheet: "Toddler Growth and Development".

Filmstrips: "How an Average One-Year-Old Behaves", Parents' Magazine Films.
"A Time for Adventure". Parents' Magazine Films, Inc.

Equipment: 35 mm Filmstrip/Cassette Player

PROCEDURE:**Steps**

1. Read "Toddler Growth and Development".
2. View filmstrips listed under resources.
3. Complete LAP test.
4. Obtain answer key and correct test.
5. Study areas of LAP test answered incorrectly.
5. If you score less than 80%, retake the LAP test until you score at least 80%.

Principal Author(s): A. Webber

TODDLER GROWTH AND DEVELOPMENT

The child from about 1 to 2 years of age is usually called a toddler. This is a period of rapid growth and development. All the areas of growth and development (physical, social-emotional, and intellectual) are rapidly changing. In this resource we will discover what most toddlers are like. It is important to remember that all children are individuals. All children have their own way of handling their world and their own rate of growth.

SOCIAL-EMOTIONAL DEVELOPMENT

Most toddlers are just discovering their independence. They may walk the other way when we want them to come. They may refuse to put on a sweater when we're dressing them. This is just a way of finding out what they can do. The toddler isn't really disobedient! If we're patient and don't push him, he will usually do what we want.

Although the toddler usually has a strong desire to be independent, he still needs us. He needs our protection and help. He needs to be babied. On one hand, he may demand that he completely dress himself. On the other hand, he may want to be rocked to sleep. He tends to be a little insecure in his new independence. The toddler also needs lots of guidance. Because he is easily distracted, he can be persuaded to leave a dangerous situation.

A child this age needs plenty of time and opportunity for play. When he plays, the toddler will usually play near adults. He needs a reassuring smile once in awhile to know everything is all right. Play is a way of learning for the toddler. He can be anything he wants. He is the master of his playtime world!

The toddler likes the company of other children. He will not, however, play with other children. He usually plays beside another child. This stage of social development is called parallel play. The toddler is not developmentally ready to share. He is usually just learning what is his. He will learn to consider the needs of others much later.

An area of common anger for the toddler is frustration with his words. He is now only learning about the world and his place in it. It's an adult world, and this can be very frustrating when you're only two! He is learning to feed himself, to like more foods, to control his elimination, and to talk. All these things will help to lessen his frustrations. Meanwhile, he needs help in dealing with frustration and anger feelings.

PHYSICAL DEVELOPMENT

The toddler is going through a period of very rapid growth. He needs plenty of exercise, the right food, rest and lots of play time. He needs to develop large muscle coordination by climbing, pushing, pulling, and riding. His smaller muscles



will develop through these activities:

1. dressing himself
2. feeding himself
3. playing with blocks
4. manipulating toys

INTELLECTUAL DEVELOPMENT

The toddler's interest span is usually short. He will move rapidly from one thing to another. This makes him especially easy to distract with something new. Playing is the toddler's way of learning. He needs plenty of playtime. He is curious about everything around him. With certain limits, he should be allowed to explore and learn as much as possible.

OBSERVATION FORM: Toddler

Observe the physical, independence, intellectual and language, and social-emotional development of the infant. List two examples of the developmental characteristics that the child is displaying in each category.

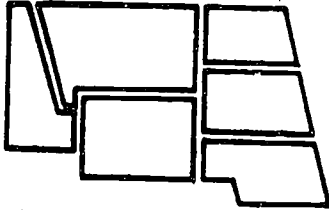
Child's Age _____

Physical 1.
2.

Intellectual 1.
& Language 2.

Independence 1.
2.

Social- 1.
Emotional 2.



Glasgow A.F.B., Montana 59231

Group Activity Package

Student: _____

Date: _____

TITLE: Growth and Development Observation Discussion

OBJECTIVE:

Discuss development of the infant and the toddler.

EVALUATION PROCEDURE:

Participation in group discussion.

RESOURCES:

Completed Observation Forms: Infant and Toddler

Understanding and Guiding Young Children, Baker & Farre

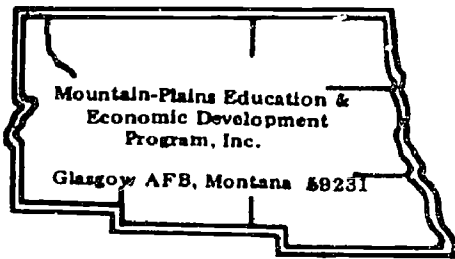
PROCEDURE:

STEPS

1. Read pages 212-218 from Understanding and Guiding Young Children
2. Discuss the following questions in the group:
 - A. What are some signs an infant may give to indicate an initial awareness of his surroundings?
 - B. How does a child develop a sense of trust?
What do we mean by "spoiling" a baby?
Does spoiling relate to a parent's insecurity? How?

At what age should a parent wean a baby?
If a child shows interest in drinking from a cup, should he be refused a bottle? Why?
 - D. Should toilet training begin when a baby starts walking?
How should parents approach toilet training and what is considered the "night" age?
 - E. How well can a toddler tell the difference between "mine" and "yours"?
Why might sharing seem threatening?

Principal Author(s): A. Webber



Learning Experience Guide

UNIT: INFANT CARE

RATIONALE:

Knowledge of the importance of and techniques for good physical care of the baby will serve as a basis for the adult helping the child reach his fullest potential .

PREREQUISITES:

Validation of Unit 66.02.01 -- Infant Growth and Development.

OBJECTIVES:

Identify the importance of and techniques for good physical care of the baby.

RESOURCES:

Printed: Attached Information Sheets.

Filmstrips: "The First Eighteen Months: From Infant to Toddler", Rita Kramer, Parents' Magazine Films, Inc., 1974.

"Child Care and Development", Elizabeth G. Mountain, McGraw-Hill Films.

Equipment: 35 mm Filmstrip/Cassette Player.

GENERAL INSTRUCTIONS:

Complete all Learning Activity Packages required, according to Student Work Plan.
Complete Unit Post test with 80% accuracy.

PERFORMANCE ACTIVITIES:

- .01 Physical Care of the Baby
- .02 Feeding the Baby
- .03 Clothing the Baby

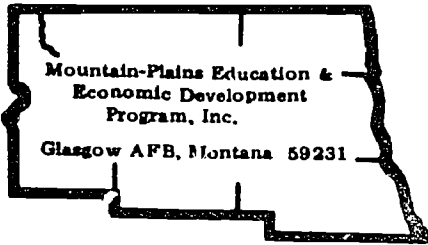
Principal Author(s): A. Webber

EVALUATION PROCEDURE:

80% correct responses on objective multiple-choice test.

FOLLOW-THROUGH:

Go to the first assigned Learning Activity Package.



Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Physical Care of the Baby**OBJECTIVE:**

Identify the techniques for physical care of the baby and the importance of good physical care.

EVALUATION PROCEDURE:

80% correct responses in the LAP test.

RESOURCES:

Filmstrip: "The New Arrival",
Attached Information Sheet: "Physical Care of the Baby".
Equipment: 35 mm Cassette/Filmstrip Projector.

PROCEDURE:**Steps**

1. View the filmstrip "The New Arrival".
2. Read "Physical Care of the Baby".
3. Complete LAP test.
4. Obtain answer key and correct test.
5. Study areas of LAP test answered incorrectly.
6. If you score less than 80%, retake the LAP test until you score at least 80%.

Principal Author(s): A. Webber

Physical Care of the Baby

Parents of a first child usually have had little experience with new babies. When they look at their own, some parents find them incredibly touching in their helplessness and see the very fulfillment of all their wishes. Others may be quite shocked and disappointed. Newborn infants are not only much smaller than parents expect, they often look like puny, thin, little old men or women, with red and very wrinkled bodies and faces. Sometimes their heads and ears are covered with long, thin, black hair. How different they are from the pictures of happy, well-rounded, smiling babies with beautiful skin and soft, wavy hair one sees in advertisements or on magazine covers. Such pictures are seldom of newborn babies but rather of children who are around three to six months old.

It is a small wonder that the new born baby looks the way he does. Delivery is a difficult experience for the mother, but, for the baby, birth is difficult too. During it, he is subject to a tremendous change. Human beings survive no other change as drastic as birth, as the baby must face a complete change in environment.

First, he is subjected to air, and, after a short period of distress, begins to breathe. He is used to the even warmth of his mother's body and now meets changes in temperature. Before he was constantly moved about, now he lies still and quiet. Completely enveloped before birth, he is now exposed and without any protective cushioning. He also experiences light for the first time and much more sound than he has met before.

The newborn often screams without any apparent reason. He may fall asleep at any time of the day, and it is often hard to judge whether he is awake or asleep.

The sleep requirements of a baby are closely related to the rate of growth. When he is growing rapidly, he needs more sleep than when his growth slows down. The newborn sleeps approximately nineteen out of every twenty-four hours. By the age of one year, the baby sleeps approximately fifty percent of the time. This amount of sleep remains approximately the same until the child is five or six years old. A very young baby sleeps in short periods of two to three hours, with waking periods for changes and feeding.

As the baby approaches his first birthday, his stomach grows in size, making it possible for him to take more food at each feeding. He is also eating foods other than milk which last longer than milk. Thus, he is able to sleep for longer periods of time at one stretch. As physical growth begins to slow down, the baby will need less sleep. During the first year, a morning and afternoon nap are necessary. By the second year, the morning nap may be eliminated.

The sleep position is important in establishing good sleep habits and in promoting restful sleep. Until the baby is three or four months old, he is usually unable to move his body from the position in which it is placed. He should be rotated during sleep from his side to his back and from his back to his other side, and from his side to his stomach. There are two reasons for rotating of positions during sleep:

1. The baby's bones are so soft that they are easily misshapen if too much pressure is placed on them for too long a time.
2. Shifting of the sleeping position eliminates fatigue and results in a deeper and more restful type of sleep.

One of the most relaxing positions is lying on the stomach. Once he becomes used to this position, it will be his favorite and he will voluntarily select it when he is put to bed.

For the first two or three months, the baby's bed may be a bassinet or a large basket lined and fitted with a mattress. The basket-type bed is conveniently moved about and is suitable for sleep outdoors when the weather is mild enough. Soon the baby will need more room and a firmer mattress. Therefore, a crib should be available when the baby is large enough to turn his body.

The most important feature of the crib is its mattress. It should be firm so that the baby's body will not sink into it. The mattress should be protected with a rubber mattress pad and covered with a fitted cotton sheet. A top sheet is not necessary. A blanket tucked in firmly at the bottom of the crib is essential.

The baby's first bath may be an oil bath followed by a warm-water sponge-off. Sponge baths are given until the navel is healed. Then a tub bath may be given daily at a time convenient for the mother. Before the baby is bathed, the room should be pleasantly warm but not hot. All the equipment needed for the bath - soap, baby cream, baby oil, boric acid, cotton, washcloth and towel - and clean clothing should be laid out in a convenient place before the water is prepared.

A wash basin or large dishpan may be used as a tub, and a flat-topped table, covered with rubber sheeting and bath towel, may be used for the place on which the baby will be laid for drying and dressing afterwards.

When the baby is old enough to sit up by himself, he is ready for a bath in the big tub. To be safe, run only two or three inches of water in the tub and never, under any circumstances, leave the baby alone while he is in the tub.

When the house is chilly or drafty or when the baby has a slight cold or fever, he should not be given a tub bath. Instead, he may be sponged off while lying on the bathing table or the mother's lap. During the bath, all parts of the body except the small area that is being sponged off should be covered with the bath towel or a cotton blanket.

It is good to accustom a baby to having his face and hands washed after every meal, before going to bed, and after his nap. When he begins to feed himself, his hands should be washed before the meal starts. By the time he is school-age, the habit of cleanliness will be so firmly established that he will not rebel at washing his hands and face as so many children do.

Sometimes babies develop a fear of the bath and cry whenever they see the bath prepared. Fear of the bath may come from getting soap in the baby's eyes which stings them, from putting him in water that is too hot or cold, from letting him slip in the tub, from getting water in his mouth, eyes, nose, or from anyone of many other causes.

Should it develop through some accident, it is best to discontinue the bath for a time and substitute a sponge bath. After several weeks, the tub bath may be resumed gradually. If the fear does not stop, it is wise to discuss the matter with the doctor. Babies under a year old, generally, forget the unpleasant experience that caused the fear if they are given several weeks or months of vacation from the tub.

There are times when a mother cannot feed, dress a baby, or bathe the baby and someone must substitute for her. From the baby's point of view, this is very beneficial. He gets used to a different feel when he is bathed by someone other than his mother.

The baby should be given the opportunity to share in the activities involved in his bath. Children need the opportunity to play in the water, squeeze sponges, run washcloths over his body, which will lead to him liking his bath.

There are certain tasks in the self-bathing situation which the baby is prevented from mastering until he is approximately six years old. Because his arms are so short, it is difficult if not impossible for him to reach his back and center of his neck, and he cannot reach far enough to dry his back and will be unable to do so until his arms grow longer.

If the teeth are kept in a good, healthy condition, free from decay, a good beginning is made in early childhood. This must include care of the gums and proper eating habits as well.

Even before the first tooth cuts through the gums, massaging the gums helps eliminate some of the discomfort that accompanies teething. As soon as the

first tooth appears, it should be brushed daily. As each new tooth appears, it can be included in the brushing. The child size brush generally has very few bristles and these are soft enough to clean the teeth without scratching the gums.

Few dentists recommend checking a baby's teeth until he is two and a half to three years old. However, should the baby fall or be hit in such a way as to loosen one of his teeth, chip it, or knock it out of his jaw completely, he should be taken to the dentist at once. Often loosened teeth firm up in the gums in time, but if the tooth has been injured to the point where the nerve is dead, the dentist will treat it or will replace it with a space maintainer to prevent having the second teeth come in crooked.

Babies need Vitamin D, furnished by sunlight, for the development of bones, teeth, and muscles. Direct exposure to the sun rays should not begin until a baby is a month old. When a baby weighs ten pounds, he can safely be outdoors two or three hours a day.

If the baby gets tanned, and if his skin is pleasantly warm, all is well. However, if his skin becomes red and moist with perspiration, there is evidence that the sun is too hot or he was in the sun too long. It is always wise to pat baby oil on the baby's skin at the end of his sunbath.

Nature provides for exercise of the baby's muscles by the constant turning of the head, kicking of the legs, waving of the arms and movements of the fingers. In order to get this kind of exercise, he must not be so bundled up or wear such restrictive clothing that he literally cannot move.

There are some muscles of the body which he cannot exercise alone, such as the trunk muscles until he is able to sit or stand. Also, the muscles in the ankles and feet until he is able to stand on them. For these reasons, babies should have an exercise period for at least one-half hour daily.

For the exercise period, the baby should be completely naked. He should be placed on a flat surface and allowed to kick his legs and wave his arms. In order to take care of the muscles that the baby cannot exercise for himself, at least half of the time should be given over to exercises that require the assistance of an adult. The following chart lists some of these exercises:

Exercises for the Baby

For back muscles: While the baby is lying on his back, let him grasp your hands firmly with his hands. Gently pull him to a sitting position and slowly let him return to the reclining position. Repeat 5 to 10 times. Stop when he shows fatigue by crying or by letting go of your hands.

For trunk muscles: While the baby is lying on his back, grasp each of his hands firmly in each of yours. Pull him slowly first to the right side and then to the left. Repeat 5 to 10 times. This exercise helps him to develop the trunk muscles not used for the sitting-up exercise.

For leg muscles: Firmly hold each of the baby's feet, just above the ankles, with each of your hands. Gently push both of his legs up so that the upper part of his legs touch his abdomen. Repeat 5 to 10 times. Then flex his legs alternately 5 times for each leg. This exercise strengthens the legs and helps to overcome a tendency to constipation.

For foot and ankle muscles: Take hold of the baby's right foot with your right hand and flex his foot gently from right to left, backwards and forwards, at least 5 to 10 times for each movement. Repeat with the left foot. Then stand close to the baby's feet and hold a large book or piece of wood against your abdomen. Encourage him to press against the book or wood.

For arm muscles: Take hold of each of the baby's hands in each of yours. Slowly flex his arms so that his hands touch his shoulders. Repeat 5 to 10 times.

For finger muscles: Dangle a brightly colored toy within the baby's grasp. Let him grasp it and play with it. This encourages him to strengthen his finger muscles.

A disease may not be warded off entirely, however, its severity can be lessened by making the baby immune to the germs that cause the disease. The protection of the individual against disease is known as "immunization." Immunization consists of introducing into the bloodstream some of the disease germs themselves or other germs that will kill the disease germs if they enter the body. Immunization should be carried out only by a doctor, but every person should be aware of what diseases are preventable and at approximately what ages immunization against these diseases should take place.

The following chart lists the diseases for which babies of today are immunized and the approximate ages at which most doctors prefer to immunize them.

Ages for Immunizing a Baby

Diphtheria, Tetanus (lockjaw) and Pertussis (whooping cough): Immunization against these three diseases is given by one shot known as a "D.P.T. Shot," to eliminate the reactions from shots for the three diseases when given separately. This is followed by two more D.P.T. Shots at intervals of one month. Six months later, a Schick test is given to determine the baby's immunity to diphtheria. Between 12 and 18 months of age, a D.P.T. Booster shot is given.

Smallpox: Vaccination for smallpox is done generally between the ages of 3 and 12 months, preferably before 6 months to prevent the baby from reaching the spot where he was vaccinated, scratching it, and causing an infection.

Poliomyelitis (infantile paralysis): There are two methods of immunization in use for this disease - the Salk vaccine and the oral vaccine. Both are very effective. Which will be used will depend upon the decision of the doctor. Most doctors recommend immunization during the first six months of life.

Scarlet fever: Immunization is recommended only when there is an epidemic of scarlet fever in the community or when there is a case in the family.

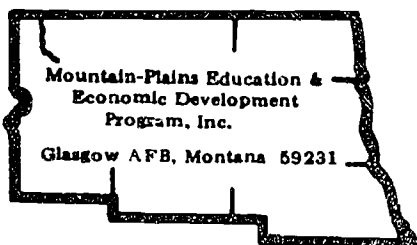
Measles: A recently developed measles vaccine is used widely for the prevention of measles. This vaccine is usually administered when a child is 8 or 9 months old. Some doctors immunize with gamma globulin which, if given soon after a child is exposed to measles, reduces the severity of the disease and prevents most accompanying complications.

Rubella: Also called German measles, Rubella is one of the least serious of the childhood diseases. However, prevention of the disease among babies and young children may reduce the chances for an epidemic among the adult population. Rubella, during the first trimester of pregnancy, often causes deformities in unborn children. Unless there is a neighborhood epidemic or a case in the family, doctors prefer deferring immunization until the baby is a year old.

Each year new methods are found for protecting babies against diseases which, in the past, have been serious or fatal. At times better methods of immunization are discovered and they replace the older methods. Young babies need periodic checkups, at which time the doctor will inform the mother when the baby is to be immunized.

Doctors keep records of the times when he immunizes a patient. However, should a baby's parents move to another community, or should the doctor who took care of the baby die, it may be difficult or impossible to get records.

As the child grows older and goes to school, to camp, to college, in the armed services, or on a trip to a foreign country, it is important for him to know just when he was immunized and for what diseases. For this reason, parents will be wise to keep a record of the immunizations of their baby and of every child in a separate notebook. In this, keep the date of each immunization and each booster shot, the name and address of the doctor who did the immunization, and any complications that may have accompanied the immunization.



Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Feeding the Baby**OBJECTIVE:**

Recognize guidelines for correctly feeding the baby and planning a baby's diet.

EVALUATION PROCEDURE:

80% correct responses on the LAP test.

RESOURCES:

Filmstrip: "Food Needs of Children", McGraw-Hill,
Attached Information Sheet: "Feeding the Baby".

PROCEDURE:**Steps**

1. Read "Feeding the Baby".
2. View filmstrip "Food Needs of Children".
3. Complete LAP test.
4. Obtain answer key and correct test.
5. Study areas of LAP test answered incorrectly.
6. If you score less than 80%, retake the LAP test until you score at least 80%.

Principal Author(s): A. Webber

Feeding the Baby

There are three important facts that must be kept in mind when planning the feeding of a baby:

1. The nutritional content of the food must contain all elements essential to growth.
2. The baby must have good digestion, good elimination, and freedom from emotional tension.
3. All babies are different – thus, a diet suited to one may not agree with another.

Within twelve hours after delivery, the newborn baby is put to the mother's breast. The nourishment he gets for the first day is not milk but "colostrum," a yellowish secretion from the breasts. In approximately three to five days the milk begins to flow from the mother's breast. Until then, the newborn receives little nourishment and may lose anywhere from several ounces to a pound or more. Babies who are bottle-fed lose less than those who are breast-fed because they get nourishment from the start of life. Since most newborns are somewhat dazed and sleepy from the shock of birth, the lack of nourishment to those who are breast-fed is of little concern. When they recover from the shock of birth, the flow of milk from the mother's breasts is generally adequate to meet their needs.

If a baby is to thrive, he must get an adequate supply of milk. When a baby is bottle-fed, it is easy to see how much milk a baby gets during every twenty-four hour period. It is a different story when he is breast-fed or when his nourishment comes from both breast and bottle. The amount of time it takes him to nurse is no gauge of the quantity or the quality of the milk he gets from the breast.

Two ways to determine whether or not the baby is getting enough nourishment from the breasts are:

1. Put him on a baby scale just before he is nursed and again immediately afterwards – always with exactly the same clothing on.
2. The baby's gain in weight over a period of a week and his behavior between nursing periods.

During the second half of the first year and throughout the second year, the baby needs less milk because his growth begins to slow down and his diet is supplemented with other food.

Doctors recognize that it takes time for a baby to learn to be hungry at specific times. They advise using a flexible schedule for feeding during the early weeks

of life. They also recognize that a schedule that suits the needs of one baby may fall short of meeting the needs of other babies. However, this does not mean that doctors of today believe in abolishing feeding schedules, nor do they tell parents to feed a baby whenever he wishes to eat. They know that this is not good for the baby and that it may interfere with the family's pattern of living.

Doctors recognize that a baby needs guidance and help in learning to eat according to a schedule. However, they do not expect a baby to adhere to a strict feeding schedule during the first few months of life. They advise mothers to guide their babies to want to eat at scheduled times.

Learning to eat according to a schedule is mastered sooner if expectations are not too high. If the baby is asleep at his scheduled feeding time, he should be wakened and given the breast or bottle. However, if he awakens early, frets, and cries it may not mean that he is hungry. He may be uncomfortable or he may want attention, not food. If he indicates hunger by interrupting his cries to make sucking movements or bites his hands, you can be certain that his cries mean hunger.

To prevent breaking the feeding schedule you are trying to establish, give him a drink of water. However, if he persistently wakes early and cries for food, it means that he is not yet ready for a schedule with such long intervals between feedings.

Whether babies get their milk through the nipple of a bottle or from the mother's breast, they sometimes swallow air. The swallowed air takes up room in his stomach, and then he may become uncomfortably full. Unless something is done to remove the air, the discomfort continues, and digestion pains occur. Sometimes the milk comes up again and the baby becomes hungry long before his next feeding.

To burp the baby, hold him upright against your shoulder and gently pat his back; or put him face down across your knees and pat. Protect yourself well with a pad, diaper or apron. The baby may be burped during and after feeding.

Doctors agreed that foods in addition to milk should be added to the diet before the child is a year old. They do not all agree, however, as to when different foods should be added.

They also recognize that babies adjust more readily to the tastes and textures of new foods if they have not become accustomed to having only a formula. Milk is lacking some essential vitamins and minerals for growth, especially iron. Even when given early, most babies have some difficulty in adjusting to the taste and texture of a new food. Thus, a new food should be given in small quantities at first and then is gradually increased as the baby shows that he is willing to eat it.

The following chart gives suggested ages for the introduction of new foods into the baby's diet. The baby should not be given a new food without the mother's discussing the matter with the doctor first.

Suggested Ages for Introducing New Foods

Orange juice (fresh, frozen, or canned): Between 1 and 3 months. Orange juice should be diluted at first and given in small quantities. The amount should be increased gradually to 2 ounces of undiluted juice.

Cereal (preferably white cereal at first): Between 1 and 4 months. Cereals should be mixed with milk at first and given in small quantities.

Fruits (stewed except for raw bananas): Between 6 and 8 months or as soon as the baby has become accustomed to cereals.

Vegetables: 2 to 4 weeks after the baby has become accustomed to fruit and cereal. Vegetables should be strained or pureed at first and mixed with the baby's formula.

Meat: Between 2 and 6 months. Meat should be slightly seared, scraped, or strained at first, and later, chopped into very small pieces.

Eggs: Between 4 and 6 months. Only the sieved yolk of hard-cooked eggs should be given at first. By 9 months, a whole egg, either soft cooked or scrambled, may be given.

Meat soups (made with rice, barley, and vegetables in puree form): 2 to 6 months or at the same time meat is given.

Toast or **zwieback** : Between 6 and 7 months. Toast or **zwieback** is usually given between feedings to encourage the baby to learn to chew.

Fish (boiled or broiled with all bones removed): Between 10 and 12 months.

Babies must get used to new tastes and used to new textures. Since they do not have teeth to use for chewing when they first start to eat foods, the foods must be strained, sieved, or blended. By the time the baby is nine months old, the food should be mashed instead of sieved and a month or two later, chopped and lumpy.

The important thing to keep in mind is not when certain foods are introduced but rather that the baby's diet during the entire day include a balanced diet. The following chart gives the food items that should appear in the baby's daily diet after the first year. These are needed for body-building, energy production, and body protection.

Suggested Meals for Babies

6 to 12 Months

Breakfast: Orange juice, cereal, egg yolk, and milk.

Lunch: Meat or meat soup, sieved vegetable, custard, junket or jello, and milk.

Supper: Cereal or potato, stewed fruit or custard made with egg, and milk.

Between Meals: Fruit juice and **zwieback** or toast with butter.

12 Months to 2 Years

Breakfast: Orange juice, cereal, whole egg, toast, and milk.

Lunch: Meat or fish, potato or macaroni or rice, vegetable in lumps, stewed fruit or simple custard or both, and milk

Supper: Cereal, fruit or custard made with egg, and milk.

Between Meals: Fruit juice and **zwieback** or toast with butter. No candy or ice cream.

To an adult, or even an older child, baby foods have a very bland taste. However, babies love them and it is the very blandness which adults dislike which makes them like this food. A baby's sense of smell, and in turn his sense of **taste**, are both very highly developed. Therefore, do not add seasoning to these baby foods.

In spite of the fact that milk, whether it be from the mother or from a cow, is the most nearly perfect food, it is lacking in Vitamin C and D and possibly in Vitamin A also. Therefore, vitamins from fish-liver oils or liquid baby vitamins are prescribed by the doctor not less than two weeks after birth. The fish-liver oil is a good source of Vitamins A and D, and from his orange juice he gets Vitamin C.

Weaning means to accustom a baby to loss of the mother's milk. In the broader sense, it means to substitute cow's milk for the mother's milk or the formula.

Weaning a breast-fed or bottle-fed baby generally begins when the baby is eight or nine months old. Before beginning the weaning, it is best to consult the doctor so as to avoid problems that result from weaning too early or too late.

This is a difficult adjustment for babies whose diets are limited almost exclusively to milk. If babies have had their milk supplemented with foods and liquids from spoons and cups, weaning is generally easy. However, weaning must be done gradually if it is to be successful.

During each meal, part of the milk should be taken from the cup or spoon and part from the nipple. In the beginning of the meal, when the baby is hungry, he should be given his milk from the nipple. Otherwise, he is likely to suck in air as he drinks. Later, when his hunger is partially satisfied, he can drink from the cup. If weaning is not delayed beyond the ninth month, it should not require more than a month, and generally less, to eliminate the sucking form of eating completely.

For the first four or five months of life, the child's eating is infantile in that food must be sucked into the mouth and swallowed without chewing. For this reason all foods must be liquid in form. The longer a baby stays on liquids and strained food the harder it is for him to learn to chew and bite. This means no longer than nine months, preferably less. Then he should have junior foods which require him to bite and chew.

The major problem with regard to chewing is that the baby does not know exactly how to go about it. So he either spits out the food or holds it in his mouth. Therefore, he should be shown how to chew. If this is not successful, it is best to put him back on a soft diet for a short time. Another problem consists of the tendency to chew "rabbit style," by using only the front teeth. A larger amount of food placed in the mouth will soon make the baby use his gums as well as his teeth for chewing.

After solid foods have been chewed, the baby must learn how to swallow them. Swallowing liquids is a natural reaction but swallowing solids, even after chewing, must be learned.

It is good for a baby to feed himself as soon as he is able, partly because it is a timesaver for mother, but mostly because it gives the baby a feeling of independence and self-confidence. The period between twelve and fifteen months is the critical time in learning self-feeding. During this time the baby has a strong desire to learn to feed himself and he will make marked headway if given an opportunity to learn and guidance in how to hold his eating utensils.

One of the most important steps to self-feeding is finger feeding. Between the age of six and seven months, a baby should be given a piece of **zwieback** or toast to suck, munch or bite. This gives him the feeling of carrying food to his mouth and is preparation for spoon and fork feeding when he is older. While eating, he should not be discouraged from picking up food from his place, even though this may seem like a sloppy habit to his parents. Only if finger feeding continues beyond the age when the baby is capable of using an eating utensil should it be discouraged.

Self-feeding is complicated. While the child is learning, you must expect him to make many mistakes and to be a sloppy feeder. However, if he is protected by a bib that covers his clothes and if a newspaper is placed under his high-chair, it will be easy to clean up after a meal.

Between the ages of one and two years is a critical time for food problems because they are more likely to start then than at any other time. The mother who is aware of this possibility is in command of the situation and is ready to handle any problem that may arise with calm assurance that all will be well. To help her to be on the alert, the list of common eating problems that begin in babyhood, given in the following chart, will serve as a guide.

Common Eating Problems of Babyhood

Variations in appetite: At some times, babies are ravenously hungry, while at others they merely pick at their food. Unless ill, the baby who eats little at one meal will make up for it at the next meal. The less said about the matter, and the less concern shown, the better for the baby.

Food likes and dislikes: Babies' likes and dislikes for food usually change from month to month. If the baby is given a balanced diet with plenty of variation from one meal to another, he will not starve. He will soon decide that it is better to eat food he is not fond of than to be hungry.

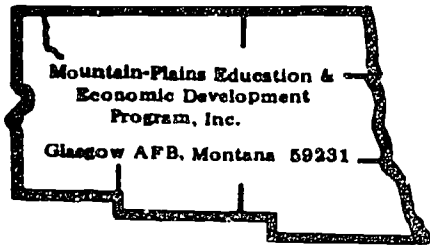
Sloppiness in eating: Spilling food is inevitable until the baby learns how to handle his eating utensils. But, if he starts to throw food or pick it up in his hands, take away his plate to let him know that he must eat properly or go hungry.

Distractibility: After the edge has been taken off the baby's hunger, he will be easily distracted from eating. Put him in a quiet place and if he still does not concentrate on eating, take away his plate.

Dawdling: No baby can be expected to eat as quickly as an older child when he is feeding himself. If he dawdles beyond a reasonable time, pick up his plate. The next meal, he will realize that he must eat when his plate is in front of him or go hungry.

Playing during meal: If he plays with his food or with a toy, take it away. If he starts to stand up in his high chair or leave the table, take away his plate. He will soon learn that mealtimes are for eating, not for play.

Wrong use of eating utensils: If the baby has been shown how to hold his eating utensils properly and has been given reasonable time to learn to do so, his meal should be taken from him if he becomes balky and reverts to the wrong way to hold them.



Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Clothing the Baby**OBJECTIVE:**

Identify the features of good clothing and clothing needs and guidelines for developing self-dressing learning.

EVALUATION PROCEDURE:

80% correct responses on LAP test.

RESOURCES:

Attached Information Sheet: "Clothing the Baby".

PROCEDURE:**Steps**

1. Read "Clothing the Baby".
2. Complete LAP test.
3. Obtain answer key and correct test.
4. Study areas of LAP test answered incorrectly.
5. If you score less than 80%, retake the LAP test until you score at least 80%.

Principal Author(s):

A. Webber

CLOTHING THE BABY

Traditionally it was believed that the baby lived in an abnormally hot environment in the mother's body for nine months before he was born. But we know that the temperature of the womb is about the same as the mother's body temperature.

Another belief about dressing a baby is that he should be bundled up with blankets to give him the feeling of security he had while he lived in the limited confines of the womb. Thus, it was customary in the past to bundle the baby up with blankets, indoors as well as outdoors.

In the hospital during the first days of life, today's babies are not wrapped in blankets except when taken to their mothers room.

When they leave the hospital, today's babies have a minimum of restrictive clothing and covering. The reason for this is that the baby must use his muscles if they are to develop normally. The more freedom the baby has, the better the chance of his using his muscles.

When a baby is taken out-of-doors in the cold of winter, he must be bundled up, as adults are. But this is generally for only a short time. The remainder of the time, he is in the comfortable warmth of the modern home and does not need the restrictions of clothes and blankets as babies of the past did.

In the following pages, the new ways of dressing babies will be discussed. The decrease in illness and death during the early critical months of life may be attributed, in part, to the new ways of dressing babies.

For the young baby, the most important single item of clothing is the diaper. Diapers come in different sizes and different materials. It is best to get the large size in cotton diapers as this will serve the baby for the entire period of diaper-wearing. Materials used for diapers are gauze, birds-eye, and cotton flannel. Gauze dries more quickly than other materials but it is not as absorbent. Birds-eye is adequately absorbent and less bulky than cotton flannel. Disposable diapers are used more and more because of their convenience.

Diapers should be changed before and after each feeding period and at times when the baby is uncomfortable because his diapers have become wet or soiled. When changing diapers it is important to sponge off the buttocks and genital organs of the baby with a clean washcloth and warm water. If there is chafing or a diaper rash, apply baby oil, cream, powder or other medication to clear it up.

Waterproof panties to cover the diaper should be used for a young baby when it is important to have his clothes remain dry. By the time the baby starts to sit up and later to stand, waterproof panties may be used to avoid the unpleasant chill which comes from wet diapers which are not covered.

Clothing for a young baby should be very simple. In addition to his diaper and shirt, the baby will spend most of his time in a sleeping garment or coverall pajamas. While the baby is lying on his back his arms may be inserted quickly into the sleeves. He may then be rolled over on his stomach and snapped or tied.

After the baby is five or six months old, his infant size clothes will no longer fit him. Since he is now very active, his clothes should be selected to enable him to have maximum freedom of movement. Diapers and shirts will still be worn; but for sleep, pajamas are recommended and for play romper suits or something similar.

As soon as the baby begins to stand up, he will need socks and soft, flexible shoes. If he does his first walking in warm weather, it is better for him to go bare-foot since he can get a firmer grip when his feet are unhampered by socks and shoes.

For cold weather, the baby needs a snowsuit. Preferably, the suit should be an all-in-one garment with a hood, mittens attached to the sleeves and feet attached to the leggings. The baby can quickly be slipped into this garment, which zips up the front and he is completely covered from head to foot.

By the time the baby is beginning to walk, training panties should replace diapers for daytime wear. During the training, it is usually wise to leave off the waterproof panties. Feeling the wet panties especially as they become cold and clammy, gives the baby an added incentive to make it known when he wants to go to the toilet.

Clothes for play and dressy occasions should be made from a washable easy care fabric. Remember to allow for freedom of movement.

Shoes with flexible soles and soft leather tops are worn until the baby has mastered the skill of walking. Then he should wear the oxford type shoe. To avoid blisters, the baby should always wear cotton anklets even in warm weather.

For busy mothers, the washing of baby clothes and diapers is often a burden. Diapers present the biggest burden. The following is a suggestion for effectively laundering diapers.

1. As soon as a wet diaper is taken off the baby, it should be dropped into a diaper pail which has been partially filled with water and covered with a lid. If a diaper is soiled with feces, it should first be scraped off with toilet paper and the feces thrown into the toilet.
2. Once daily the diapers can be washed. If there is a washing machine (standard or automatic) this is a simple operation.
3. If there is no washing machine, diapers should be washed in warm water with soap flakes or a detergent, then boiled in a large pail of water with a pinch of washing soda.

4. After washing, diapers should be rinsed in clear water, stretched out, and hung up to dry. Diapers may be dried in an automatic dryer if one is available.

Babies should not wear the same clothing twice without laundering. They are fresher, cleaner, and less likely to have skin irritations if they change to clean clothes once or twice a day.

Most mothers overdress their babies partly because they are afraid the baby will catch a cold unless well protected and partly because they think the baby looks prettier when dressed up. A shirt and diaper do nothing to enhance the baby's looks, while a dress and ribbons and lace give them an angelic look.

The fewer clothes a baby wears, the happier and healthier he will be. There are a number of reasons for this:

1. Having clothes put on is a frustrating experience for a baby. He resents having his head held to get the garments over it.
2. A baby does not need a large number of garments to be adequately warm.
3. Even more important, it is not good for him to be overdressed. Babies who are overdressed tend to have more colds and respiratory problems than babies who seem to be underdressed. To determine whether the baby's clothing is adequate to meet his needs, feel his legs, arms or neck. If they are comfortably warm, he is warm. Babies feet and hands tend to be cold all the time. For that reason it is hard to judge if they are adequately dressed.
4. A baby must have freedom to move his body and thus exercise his muscles.

Every baby wants to dress himself when he has reached the point where he is capable of doing so. He should be encouraged in this, shown how to put on and take off the different garments and, above all praised for his efforts - even if his shirt is on inside out and backwards. He will be very proud of his achievements.

Babies will vary in ages at which time they are ready to dress themselves. The time between eighteen months and two and a half years is the critical time in self dressing for most babies because this is when they are most eager to learn.

The following chart gives the approximate ages at which most babies are capable of performing the skills needed in self-dressing. Note that undressing comes before putting on the different garments. This is because it is easier, at all ages, to take off a garment than it is to put one on.

AGES FOR SELF-DRESSING SKILLS

1 to 1 1/2 years: Pulls off cap, booties, socks and mittens.

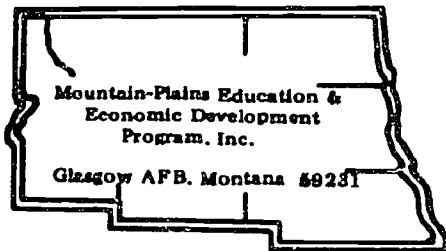
1 to 1 1/2 years: Fumbles with buttons and zippers.

1 1/2 to 2 years: Takes off all garments, even his diapers.

1 1/2 to 2 years: Tries to put on shirt, sweater, socks, and cap but gets tangled up in the garments.

1 1/2 to 2 years: Opens garment by pushing buttons through holes and pulling down the zipper.

At 2 years: Tries to put on all garments but is successful only with shirts, sweaters, and caps.



Learning Experience Guide

UNIT: DEVELOPING THE BABY'S POTENTIAL

RATIONALE:

Knowledge of the techniques for teaching the infant and toddler will enable the adult to help the child develop to his fullest potential within the home.

PREREQUISITES:

Validation of Unit 66.02.02 -- Infant Care.

OBJECTIVES:

Identify techniques for teaching the infant and toddler in the home in keeping with the level of development.

RESOURCES:

Printed

Your Child's Intellect, pages 27-75, Bell, Olympus Publishing Co.
Attached Information Sheets.

Audio-Visuals: (Filmstrips)

"Preparing The Child For Learning", Dr. J. Ronald Lally, Parents' Magazine Films, Inc., 1973.

GENERAL INSTRUCTIONS:

Complete all Learning Activity Packages required, according to Student Work Plan.
Participate in all Group Activity Packages required. Complete Unit Post Test with 80% accuracy.

PERFORMANCE ACTIVITIES:

- .01 Learning in the Home.
- .02 Learning During The First Ten Months.
- .03 Learning During Ten To Eighteen Months.
- .04 Learning Activity Demonstrations (GAP).

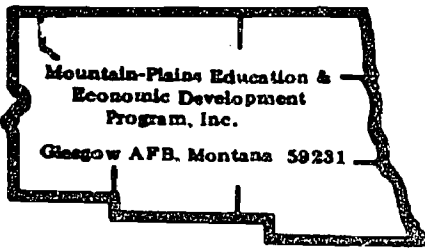
Principal Author(s): A. Webber

EVALUATION PROCEDURE:

80% correct responses on objective multiple-choice test.

FOLLOW-THROUGH:

Go to the first assigned Learning Activity Package.



Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Learning in the Home**OBJECTIVE:**

Identify techniques for teaching a young child at home and reasons for using these techniques.

EVALUATION PROCEDURE:

80% correct response on LAP test.

RESOURCES:

Filmstrip: "Where Can A Young Child Learn", Parents Magazine.

Attached Information Sheet: "Learning In The Home".

Equipment: 35 mm Filmstrip/Cassette Projector.

PROCEDURE:**Steps**

1. View filmstrip "Where Can A Young Child Learn".
2. Read "Learning In The Home".
3. Complete LAP test.
4. Obtain answer key and correct test.
5. Study areas of LAP test answered incorrectly.
6. If you score less than 80%, retake the LAP test until you score at least 80%.

Principal Author(s): A. Webber

LEARNING IN THE HOME

The first five years of a child's life are among the most important years for learning. During this time most learning takes place in the home. Parents are usually the child's most important teachers. The first year of learning in the home should meet two important goals:

1. To develop mental powers as much as possible.
2. To learn to enjoy learning.

In order to meet these two goals, empathy and reinforcement should be used. These two guidelines for teaching will be described below.

Empathy

Empathy is the ability to understand the feelings and ideas of others. Parents should, when teaching their child, try to empathize. The ability to understand their child's feelings will make them better teachers. Studying the child's reactions and learning everything you can about him will help. The parent needs to remember that each child is an individual. Each child will enjoy his own kind of learning and progress at his own rate.

Reinforcement

Reinforcement is the most important tool used in teaching. The child will be led in learning, not pushed. The positive use of reinforcement will help the child develop a good self-image. Learning will continue because his experiences have been successful. The following rules apply to the positive use of reinforcement in teaching.

1. Reward desirable behavior. When the child does something you want him to reward him. This reward can be many things, a small word of praise, hug, snack, etc.
2. Avoid any reward of undesirable behavior. Even scolding a child who does something for attention can be reinforcement. Bad attention is sometimes better than no attention at all.
3. Try to avoid the use of negative responses to behavior. The toddler who is beginning to explore his world can become very discouraged if he hears "No!" too often. Especially in a learning situation, however, it is important that the child be told if his answer is wrong. This should be done as positively as possible. For example, emphasis could be placed on the previous right answer when telling him his answer is wrong.

Along with empathy and reinforcement, the level of difficulty in learning is very important. The child must feel successful if learning is to continue. The child should usually respond correctly about 8 out of 10 times. If he is responding correctly fewer times than this, the material is too hard. If the child is correct 100% of the time, it is time for more difficult material. It is important not to push the child. He should be learning, progressing, and feeling successful. The level of success and progress is important to a good self-image.

THE HOME FOR LEARNING

In order for maximum learning to take place in the home children need:

1. A wide variety of experiences and constantly changing experiences.
2. Guidance in their development.
3. To actively respond in learning situations.

When a child begins exploring the objects in his home he should be encouraged. Of course, steps must be taken to protect the child and the more precious objects in the home. Once this is done, however, the child should be generally free to explore and learn.

Children need constant vocal stimulation from birth on. Studies have shown that these children who are talked to in family situation will try to talk sooner. In order to teach the child to identify objects and listen before he can actually speak, the parent should:

1. Clearly repeat the names of objects around the baby.
2. Use correct words.
3. Avoid confusing terms, such as "cat" and "kitty".
4. Avoid the use of baby talk when teaching the child to speak.

HOUSEHOLD ITEMS AND EDUCATIONAL TOYS FOR TEACHING

The following section describes different toys for different age levels. These toys should generally provide stimulation of the senses, which is important from birth on.

Crib Toys



When purchasing crib toys, remember they should stimulate the senses and provide a wide variety. As soon as the child is able to focus his eyes, he should be provided with colorful crib toys. This will stimulate his vision. These toys should be placed so he must reach. This provides physical exercise. Crib toys should stimulate hearing (different sounds) and curiosity. Curiosity is usually stimulated if a wide variety is provided. Crib toys should be changed frequently. A variety of shape, color, sound, and functional response should be provided. Usually, the greater the stimulation, the more growth that takes place.

Toys For The Creeper

By the time the child is able to creep and crawl, he should generally be able to reach, grasp, listen, focus his eyes, imitate, and respond to various stimulation. Toys for a child of this age should provide a large variety of stimulation. Curiosity and listening ability need stimulation. Toys should provide the opportunity to see differences in shapes, colors, etc. A child that age needs a large amount of muscle activity. Now is the time for him to begin learning to coordinate his hands and feet with his vision.

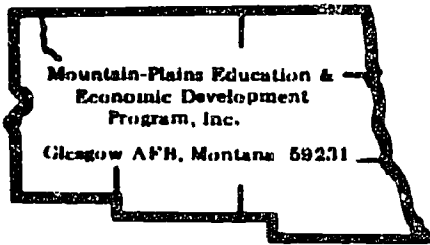
Educational toys are a great aid in teaching a young child. Educational toys should help develop the child's mental abilities and enjoyment of learning. They usually require the use of two or more senses (i.e., hearing and sight, touch and sight, etc.) Many educational toys require physical as well as mental activity. Because these toys usually require more than one person, the parent is involved in this learning process.

Educational toys should be used with consideration for the child's level of interest and ability. Again, the importance of success in learning is seen. The use of these toys should be "child directed". This means the child should be allowed to decide when to start and stop the game. This is important if learning is to be enjoyable for the child. In order to be most effective, educational toys should be special. They should be easily reached by the child, but still used only during learning sessions.

If it is used correctly, another valuable teaching aid is the family television. Many children's programs are very educational. In order for the most learning to take place, the child must respond actively. Therefore, it is important to follow an educational program with active learning. The parent should lead an active learning situation that covers the things taught in the TV program.

It is important that the home provide an active learning place for the child. In order to do this, the parent should:

1. Use empathy and reinforcement.
2. Provide a wide variety of experiences.
3. Engage the child in active learning situations.
4. Take care to consider the child's abilities and interests in all learning situations.



Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Learning During the First Ten Months**OBJECTIVE:**

Identify ways of teaching and what an infant must learn in keeping with his level of development.

EVALUATION PROCEDURE:

80% correct responses on LAP test.

RESOURCES:

Attached Information Sheet: "Learning During the First Ten Months".

PROCEDURES:**Steps**

1. Read "Learning During the First Ten Months".
2. Complete LAP test.
3. Obtain answer key and correct test.
4. Study areas of LAP test answered incorrectly.
5. If you score less than 80%, retake the LAP test until you score at least 80%.

Principal Author(s):
A. Webber

LEARNING DURING THE FIRST TEN MONTHS

There are two major goals in all learning situations with children. They are:

1. Develop mental abilities as much as possible.
2. Develop the feeling of enjoyment in learning.

It is important to remember that the child's feelings play an important part in the success of a learning situation. Use of empathy and reinforcement (refer to Lap 66.02.03.01.A2-0 -- Learning In the Home) are very important. Learning should be fun if it is to continue.

It is important, also, to remember that each child is an individual. Each child will have his own interests and abilities. Each child will progress at his own rate. Do not pressure a child to learn what you think he should learn. Below are described the learning that generally should take place in the first ten months of life. These were arrived at from what has been learned about most children. Experiences using the senses are used throughout this learning. Sensory experiences should begin at birth and continue all through life.

Educational Goals During First 10 Months

1. Build identification skills.
2. Encourage voice sounds.
3. Encourage sight, listening, and muscular development.
4. Encourage enjoyment of learning.
5. Build confidence in abilities.

First Few Weeks

A newborn baby needs a variety of stimulation immediately. The senses should be stimulated from birth on. The baby needs many and varied crib toys. These should provide varied sounds, colors, patterns, textures and functional response. These toys should also provide opportunity for muscular development. The baby should be encouraged to kick, grasp and reach immediately after birth. The child should set or lie in many positions and in many places in the home. This also provides more variety of stimulation of the senses.

It is very important during all learning experiences that the child feel loved and secure. If his physical needs and love needs are met, he will be encouraged to learn about his world. Quiet and inactive babies should not be ignored. They may need more physical and mental stimulation than more active babies.

16 Weeks of Age

Most children at this age want to be held and propped up. This should be done in as many different places as possible. Feeding and sleeping schedules should be fairly routine by this time. Most babies at this age are able to follow moving

objects with their eyes and reach for them. The baby is generally cooing and trying to make sounds other than crying.

Generally, a child of this age needs:

1. Tasting, touching, and reaching experiences.
2. Stimulation to smile and even laugh out loud.
3. Physical exercise by reaching and kicking.
4. Experience in learning to sleep at normal noise levels.



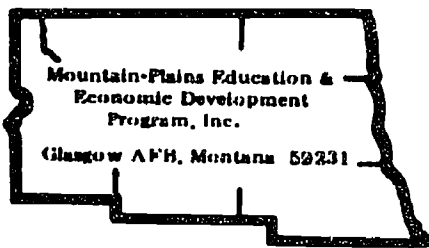
5 to 7 Months

A child this age usually prefers a sitting position in a place where he can interact with others. He has generally begun to learn about gravity from falling objects. At this time, he will generally be trying to get up on all fours.

Because the baby of this age is usually trying to get into a crawling position, he needs increased physical activity. If he topples from a sitting position and is not hurt, he should be allowed to struggle a bit. This will help increase his balance and muscular ability. The baby needs much encouragement at vocalizing. The family should show pleasure at his attempts to speak. He needs encouragement to grasp and bang toys. Shifting objects from one hand to another will help develop coordination.

10 Month Old

From 7 to 10 months the infant will generally become restless as he attempts to crawl. As he attempts to crawl, it is good to encourage him by placing a brightly colored object in front of him. This encourages reaching and stimulates arm and leg movements. The child should be allowed to crawl and walk in areas with a wide variety of textures. This is a time for increased richness and variety of experiences. There should be increases in language, music, color, shape, and texture stimulation.



Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Learning During Ten to Eighteen Months

OBJECTIVE:

Identify guidelines for teaching the toddler and identify his needs and abilities in learning.

EVALUATION PROCEDURE:

80% correct responses on LAP test.

RESOURCES:

Attached Information Sheet: "Learning During Ten to Eighteen Months".

PROCEDURE:

Steps

1. Read "Learning During Ten to Eighteen Months".
2. Complete LAP test.
3. Obtain answer key and correct test.
4. Study areas of LAP test answered incorrectly.
5. If you score less than 80%, retake the LAP test until you score at least 80%.

Principal Author(s):

A. Webber

LEARNING DURING TEN TO EIGHTEEN MONTHS

A child from ten to 18 months old is generally not ready for formal periods of instruction. However, his instruction should be more orderly and more carefully planned than before. A child this age should generally be able to sit up when he wants and stand with some support. It is not uncommon to see this child pull himself up to stand and even take a few steps.

This child is usually able to respond to the mood of others. He can understand feelings from the tone of voice. He is very interested in objects around him. You'll usually find him pushing and throwing things to watch them fall. He should be developing a speaking vocabulary. He is usually interested in having very simple stories told to him from pictures.



This is a time of rich learning possibility for all children. It is the parents' responsibility to teach the child the correct principles and facts. The child's enjoyment of learning is also very important if learning is to continue. The two prime areas of learning at this age are physical and vocal stimulation.

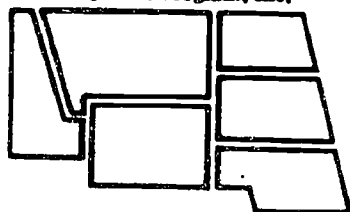
Physical Stimulation

The 10 to 18 month old child should be given every opportunity to:

1. develop hand coordination by placing things in containers and taking them out.
2. stack objects until they fall.
3. explore and become acquainted with objects in the home.

Vocal Stimulation

1. **Names of objects.** The child should have constant **repetition** of names of objects and their function. He should learn to recognize objects in pictures in his books. Because of this, the child's first books should be about things familiar to him. Try to get him to point to an object and say the name. Be careful not to discourage the child by correcting him for a wrong name. Merely repeat the proper word and respond to his request.
2. **Conversation.** It is especially important at this time that the child be engaged in frequent conversation. Talk to the child in short, clear sentences. Jabbering by the child should be encouraged. The child at this age should be given many opportunities to develop listening abilities. This will be most helpful when he begins to read. He should learn to follow simple instructions. He should usually learn a speaking vocabulary of at least 20 words and be able to name 5 body parts.



Glasgow A.F.B., Montana 59231

Group Activity Package

Student: _____

Date: _____

TITLE: Learning Activity Demonstration

OBJECTIVE:

Demonstrate learning activity for infant or toddler to the group.

EVALUATION PROCEDURE:

Demonstration Evaluation Checklist: Learning Activity Demonstration.

RESOURCES:

Demonstration Evaluation Checklist: Learning Activity Demonstration.

Your Child's Intellect, Bell.

Item to be used in Learning Activity.

PROCEDURE:

Steps

1. Prepare learning activity for infant or toddler.
2. If ideas are needed. Check In Your Child's Intellect, Bell.
3. Make sure your demonstration includes all the points listed in the "Demonstration Evaluation Checklist".
4. Demonstrate the learning activity to the group.

Principal Author(s): A. Webber

DEMONSTRATION EVALUATION CHECKLIST: LEARNING ACTIVITY DEMONSTRATION

Demonstration must include:

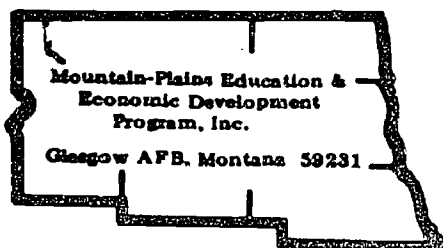
1. Age of the child for whom the learning activity was prepared.
2. The item should be at least vaguely familiar to the child.
3. How will you encourage the child to do the discovering?
4. How will the learning activity include the use of as many of the child's five senses as possible?
5. What will the child gain from this learning activity?

EVALUATION PROCEDURE:

80% correct responses on objective multiple-choice test.

FOLLOW-THROUGH:

Go to the first assigned Learning Activity Package.



Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Learning in the Home**OBJECTIVE:**

Identify techniques for teaching a young child at home and reasons for using these techniques.

EVALUATION PROCEDURE:

80% correct response on LAP test.

RESOURCES:

Filmstrip: "Where Can A Young Child Learn", Parents Magazine.

Attached Information Sheet: "Learning In The Home".

Equipment: 35 mm Filmstrip/Cassette Projector.

PROCEDURE:**Steps**

1. View filmstrip "Where Can A Young Child Learn".
2. Read "Learning In The Home".
3. Complete LAP test.
4. Obtain answer key and correct test.
5. Study areas of LAP test answered incorrectly.
6. If you score less than 80%, retake the LAP test until you score at least 80%.

Principal Author(s): A. Webber